

**CITY OF BINGHAMTON**  
**RENTAL REGISTRATION APPLICATION**  
**CORPORATE OWNER INFORMATION**

*Every owner of a Rental Property or Rental Unit(s) is required to register each Rental Property/Unit(s) and pay all fees in accordance with § 265 of the Code of the City of Binghamton, except (i) the Owner of a two-unit dwelling where the Owner occupies one such dwelling unit; (ii) the United States, State of New York, Broome County, or the City of Binghamton; (iii) any Mortgagee in a foreclosure proceeding pending sale, unless such Mortgagee is collecting rents for the Rental Property/Unit(s); or (iv) any property registered as a vacant property pursuant to § 265-14. Incomplete Rental Registration Applications shall not be accepted and will be returned to the Owner by the City Clerk.*

**OWNER INFORMATION**

*If the Owner is a general or limited partnership, limited liability company, or corporation, please outline the names, home or business addresses, telephone numbers and email addresses of all partners, managers, members or officers in the space provided below. Attach additional pages, if necessary.*

**Business Name:** \_\_\_\_\_

**Please indicate the composition of your organization:**

☐ General/Limited Partnership    ☐ Limited Liability Company    ☐ Corporation    ☐ Other: \_\_\_\_\_

**Partner/Manager/Member/Officer A:** \_\_\_\_\_

**Home/Business Address:** \_\_\_\_\_

*Note: Post Office box addresses are not acceptable.*

**Telephone Number(s):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Note: If this field is not completed, the application will be considered incomplete.*

**Partner/Manager/Member/Officer B:** \_\_\_\_\_

**Home/Business Address:** \_\_\_\_\_

*Note: Post Office box addresses are not acceptable.*

**Telephone Number(s):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Note: If this field is not completed, the application will be considered incomplete.*

**Partner/Manager/Member/Officer C:** \_\_\_\_\_

*Note: Post Office box addresses are not acceptable.*

**Home/Business Address:** \_\_\_\_\_

**Telephone Number(s):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Note: If this field is not completed, the application will be considered incomplete.*

**Partner/Manager/Member/Officer D:** \_\_\_\_\_

**Home/Business Address:** \_\_\_\_\_

*Note: Post Office box addresses are not acceptable.*

**Telephone Number(s):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Note: If this field is not completed, the application will be considered incomplete.*